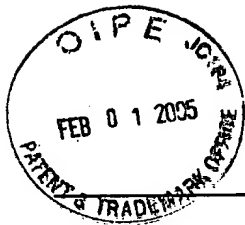


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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 3580-011343																								
Application Number 09/929,696		Filed August 14, 2001																								
For Abrasive Polishing Composition																										
Art Unit 1755		Examiner Michael A. Marcheschi																								
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 40%;"></th><th style="width: 20%; text-align: center;">Fee</th><th style="width: 20%; text-align: center;">Small Entity Fee</th><th style="width: 20%;"></th></tr></thead><tbody><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td style="text-align: center;">\$120</td><td style="text-align: center;">\$60</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td style="text-align: center;">\$450</td><td style="text-align: center;">\$225</td><td>\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td style="text-align: center;">\$1020</td><td style="text-align: center;">\$510</td><td>\$ 510.00</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td style="text-align: center;">\$1590</td><td style="text-align: center;">\$795</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td style="text-align: center;">\$2160</td><td style="text-align: center;">\$1080</td><td>\$ _____</td></tr></tbody></table> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>23-0650</u>. I have enclosed a duplicate copy of this sheet.</p> <p>WARNING: Information on this form may become public. Credit Card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>31,198</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="width: 60%; text-align: center;"> _____ Signature Barbara E. Johnson _____ Typed or printed name</div><div style="width: 35%; text-align: center;"><u>January 28, 2005</u> Date <u>412-471-8815</u> Telephone Number</div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">02/03/2005 REFKADU1 00000008 09929696</div><div style="width: 35%; text-align: center;">510.00 OP</div></div> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>				Fee	Small Entity Fee		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ _____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ _____	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 510.00	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____
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This collection of information is required by 37 CFR 1.36(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

1755
SFJ
Attorney's Docket No. 3580-011343**AMENDMENT TRANSMITTAL LETTER**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Serial No.: 09/929,696Filing Date: August 14, 2001Examiner: Michael A. MarcheschiGroup Art Unit: 1755Invention: Abrasive Polishing Composition

Transmitted herewith is an Amendment in the above-identified application.

- ☒ Small Entity Status is/has been asserted for this application under 37 CFR 1.27.
☐ A verified statement to establish small entity status under 37 CFR 1.27 is enclosed.
☐ No additional fee is required.
☒ The fee has been calculated as shown below:

	No. of Claims After Amendment	Highest No. Previously Paid For	Present Extra	Small Entity Rate	Non-Small Entity Rate	Charge
Total	<u>3</u>	<u>20</u>	<u></u>	x \$ 25.00	x \$ 50.00	\$ <u>0</u>
Indep.	<u>1</u>	<u>3</u>	<u></u>	x \$100.00	x \$200.00	\$ <u>0</u>
First Presentation of Multiple Dependent Claim/s				+ \$180.00	+ \$360.00	\$ <u>0</u>
TOTAL ADDITIONAL FEE						\$ <u>0.00</u>

- ☐ A check in the amount of \$ is enclosed to cover the additional fee.
☒ A check in the amount of \$ 510.00 is enclosed for a **three**-month Petition for Extension of Time.
☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication to Deposit Account No. 23-0650. Please refund any overpayment to Deposit Account No. 23-0650. An original and two copies of this sheet are enclosed.
☒ Any additional filing fees required under 37 CFR 1.16.
☒ Any patent application processing fees under 37 CFR 1.17.


January 28, 2005
Date

By 

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Attorney for Applicant(s)
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E-mail: webblaw@webblaw.com

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on January 28, 2005.

1/28/05
Date


Signature

Kimberly N. Welday
Typed Name of Person Signing Certificate